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# T	UTILI	TY PAT	TENT AP	PLIC	CATION	TRANSMITTAL	Att	Attorney Docket No. MASJ				_ ⊘ ;	
<u>የ</u>	(for n	onprovis	sional appli	cation	s under 37	C.F.R. § 1.53(b))	Exp	Express Mail No. EV369937			965US	22553	
TO:	Mai	l Stop Pa	atent Applie	cation						_		25.	
	Con	nmission	er for Pater	nts			- 1					~1	
P.O. Box 1450 Alexandria, VA 22313-1450													
Alexandra, VA 22313-1430							PLI	PLEASE ASSOCIATE APPLICATION WITH					
Inventor(s): Byron J. Masterson, M.D.							CUSTOMER NO. 05251						
Title: EYEWEAR HAVING A MAGNIFIED WIDE							İ						
FIE	LD OF						ļ						
Enclose	d are:												
	Non-Pul	Publication Request Under 35 U.S.C. § 122(b)(2)(B)(i)											
Ī4		of specification including abstract											
2		o) of drawings											
X	an assig	gnment of the invention to: Hidden Harbor Group, L.L.C.											
X		ration of Inventor(s): X Newly executed Copied from a prior application (for co									in/div)		
	Consider	praction by Reference: the entire disclosure of the prior application, from which the copy or copies of the oath or declaration is supplied, is cred to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.											
X	small en	entity status is claimed.											
<u></u>	small en	entity status was requested in prior application; status still proper and desired.											
[X]	Informat	rmation Disclosure Statement/PTO-1449/Copies of IDS citations. No copies attached											
		enefit is claimed under 35 U.S.C. 119(e) of U.S. Provisional Application No.											
	Other:		- <u>-</u> -										
Te-C													
			ion: Check	approp -	riate box, ar	d supply the requisite info	rmation be	low:					
	Continuation	on 🔲	Divisional		Cont	inuation-in-Part (CIP)		of prior application no.					
Prior a	pplication	informati	ion:	Exan	niner:			Group Art Unit:				\dashv	
 _				L						.			
						CLAIMS AS FIL							
BASIC	PEE					NUMBER FILED	NUME	BER EXTRA		RATE	FEE	\Box	
<u> </u>	L CLAIM									\$ 385	\$ 385	\neg	
•						14- 20 =		0	X	\$ 18	\$ 0		
	PENDENT			FORM	-	1-3 =		0	X	\$ 86	\$0		
MULTIPLE DEPENDENT CLAIM PRESENT					· · · · · · · · · · · · · · · · · · ·				<u> </u>	\$ 290	\$		
* Number extra must be zero or larger				<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·		TOTAL	\$ 385				
				1.2	applicant ha 27. then divi	s small entity status under a de total fee by 2, and enter	37 CFR 1.9	and	S	MALL ENTITY	\$ 385		
					.,,	de total fee by 2, and enter	amount ne	ic.		TOTAL	ı	ļ	
Х	Assignme	ent record	al fee enclos	ed							\$ 40.00		
<u> </u>	<u>-</u> -									TOTAL DUE	\$ 40.00	_	
X	A check i	in the amo	ount of \$ 425	5.00 to	cover the fi	ling fee and assignment re-	cordal is e	nclosed		TOTAL DUE	\$ 425.00		
×	Commiss	ioner is he	ereby author	ized to	charge/cred	lit Deposit Acct. No. 19-21	12 as desc	ribed below Fo	closed :	s a duplicate of the	c cheet	\dashv	
	ТОТ	issioner is hereby authorized to charge/credit Deposit Acct. No. 19-2112 as described below. Enclosed is a duplicate of this sheet.											
		Charge the amount of \$ as filing fee. Credit any overpayment.											
	 												
	⊠	Charge :	any addition	at tilin	g tees requir	red under 37 CFR 1.16 and	11.17.					\neg	
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					<i>N</i>	whyhr 9. Signature	un	m					
						/ Signature			Dat	e 01/21/04			

Name: Christopher J. Eaton, Reg. No.: 51,143